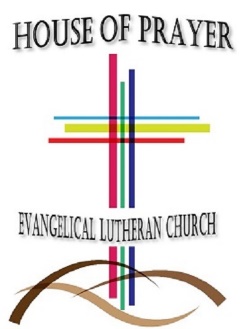
*HOUSE OF PRAYER*

EVANGELICAL LUTHERAN CHURCH

**Sunday School Registration Form**

2017-2018 Registration Form

(Ages 3 – Grade 5)

***Sunday School begins September 10, 2017***

***8:45 – 9:50 AM***

##### Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade Entering: \_\_\_\_\_\_Birthday:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade Entering: \_\_\_\_\_\_Birthday:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade Entering: \_\_\_\_\_\_Birthday:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade Entering: \_\_\_\_\_\_Birthday:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(If you have more students to list, please use the back of the form.)

**Pre-School children need to be 3 years old by August 31 and potty trained to register for Sunday School.**

**\*Free will donations are greatly appreciated. Your gift can be monetary or in the form of gift cards from Staples, Hobby Lobby, Parable, Sam's Club, Cash Wise or Target. All donations will be used to purchase supplies and support activities throughout the year.**

**Would you be willing to join our teaching team 1-2 Sundays per month? \_\_\_\_\_YES \_\_\_\_\_NO**

**If so, which class would you be interested in teaching? \_\_\_\_\_\_Pre-K \_\_\_\_\_\_\_K-1 \_\_\_\_\_\_\_2-3 \_\_\_\_\_\_\_4-5**

#### Parent’s/Guardian’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Cell Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_House of Prayer Member? Y\_\_\_\_ N\_\_\_\_\_**

**Does your child have any special needs (academic, medical, physical, etc.) of which the teacher needs to be aware? If so, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Do you prefer to be contacted via email, text, or phone call? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I hereby grant permission for House of Prayer to record pictures or videos of my child/children \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, while on the church property or at a church-sponsored event. I also give permission to House of Prayer to use these images or videos in church print and online publications including church websites and social networks.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent or guardian of above named child/children